



ARIZONA EARLY INTERVENTION PROGRAM FOR INFANTS AND TODDLERS

Program Name

[Date]

[Parent's Name]

[Mailing address]

Dear [Parent's Name]:

This letter is to let you know that [child's name] is eligible for the Arizona Early Intervention Program (AzEIP) based upon the discussions with your family, a review of information, the team's assessment, informed clinical opinion, and [your child's diagnosis of _____] ***OR the developmental evaluation which found a 50% or more delay in the area(s) of physical/communication/social emotional/adaptive/cognitive development.***].

What happens next?

- You will be contacted by your lead team member to schedule a time to plan for and/or to develop your family's Individualized Family Service Plan (IFSP).
- Your resources, priorities, concerns, and interests as they relate to your child's development will guide your IFSP.
- The IFSP process identifies the outcomes that you feel are important to your child and family.
- You and your team will then identify strategies/ideas, people and settings or places within your daily routines and activities to promote your child's development.
- Your team will then help identify supports and services to assist your child and family to meet the outcomes.

The IFSP is developed with you and your family, professionals involved in the evaluation and assessment of your child, your on-going service coordinator from [agency], and anyone else you wish to invite. All early intervention supports and services are provided on a voluntary basis. You will be asked to give your written consent after discussing all of the available and relevant information. You may decline any of the supports and services and receive only those to which you provide consent.

You should have received a copy of the Procedural Safeguards for Families Booklet. If you disagree with this finding of eligibility, you may use any of the ways described in the booklet for resolving disagreements. Please let me know if you would like another copy of the Booklet. You may also find this information on the DES/AzEIP website at <http://www.azdes.gov/azeip/>.

If you need help with this or if you have any questions, please call me.

Sincerely,

[Name]

IPP Team Lead

[Program Name]

[Program Address]